# APPLICATION DF A SHEET

#### **Application Information**

Application Number:: Not Yet Assigned

Filing Date:: July 30, 2003

Application Type:: Regular

Subject Matter:: Continuation in Part of PCT/EP02/00913

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks:: None

Number of Copies of CDs:: None

Sequence Submission?:: None

Computer Readable Form

(CFR)?::

None

Number of Copies of CFR:: None

Title:: COMPUTER SYSTEM

Attorney Docket Number:: 37934-189636

Request for Early Publication?:: No

Request for Non-Publication?:: No

**Suggested Drawing Figure::** 4

**Total Drawing Sheets::** 4

Small Entity?:: YES

Latin Name::

**Variety Denomination Name::** 

Petition Included?:: No

**Petition Type::** 

**Licensed US Govt. Agency::** 

**Contract or Grant Numbers::** 

**Secrecy Order in Parent Appl.::** 

#### Applicant Informatic

**Applicant Authority Type::** 

Inventor

**Primary Citizenship::** 

German

Country::

Germany

Status::

**Full Capacity** 

Given Name::

Jürgen

Middle Name::

Family Name::

**ANGELE** 

Name Suffix::

City of Residence::

Herxheim

**State or Province of Residence::** 

Country or Residence::

**GERMANY** 

**Street of Mailing Address::** 

Obere Hauptstrasse 19

City of Mailing Address::

Herxheim

**State or Province of Mailing** 

Address::

**Country of Mailing Address::** 

Germany

Postal or Zip Code of Mailing

Address::

D-76863

### **Correspondence Information**

**Correspondence Customer** 

26694

Number::

**Phone Number::** 

(202) 962-4800

Fax Number::

(202) 962-8300

E-Mail Address::

rkinberg@venable.com

## Representative Information

**Representative Customer** 

26694

Number::

## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This is a	Continuati n of	PCT/EP02/00913	January 30, 2002
	Continuation of		
	Continuation of		
	Continuation of		

### For ign Priority Info..nation

Country:: GERMANY	Application Number:: 101 03 845.3	Filing Date::	Priority Claimed:: YES
		January 30, 2001	

# **Assignee Information**

**Assignee Name::** 

**ONTOPRISE GMBH** 

**Street of Mailing Address::** 

Amalienbadstrasse 36/Raumfabrik 29

City of Mailing Address::

Karlsruhe

**State or Province of Mailing** 

Address::

**Country of Mailing Address::** 

Germany

Postal or Zip Code of Mailing

D-76227

Address::